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		Attorney Docket Number		sprays a valid CWIS COULD NUMBER.			
PLANT PATENT APPLICATION (35 U.S.C. 161) DECLARATION		First Named Inventor	Way				
		COMPLETE IF KNOWN					
(37 CFR 1.6	63)	Application Number	/				
	Declaration Submitted after Initial	Filing Date					
with Initial OR	with Initial OR Filing (surcharge						
required)		Examiner Name					
As a below named inventor, I hereby do	eclare that:						
My residence, mailing address, and citize	enship are as stated below n	ext to my name.					
I believe I am the original, first and sole in new and distinct variety of:	eventor (if only one name is t	isted below) or an original, first a	nd joint inventor (if p	lural names are listed below) of the			
Sweet Cherry Tree							
plant named: Ridgewood	Cherry'						
which is claimed and for which a plant pa	which is claimed and for which a plant patent is sought, the specification of which						
X is attached hereto OR	X is attached hereto OR was filed on (MM/DD/YYYY) as United States						
Application Number	Application Number and was amended on (MM/DD/YYYY) (if applicable).						
amendment specifically referred to above	I hereby state that I have reviewed and understand the contents of the above identified specification, including the claim, as amended by any amendment specifically referred to above.  I have asexually reproduced the plant to which this application applies.						
Said plant was found in a cultivated	l area (check this box for ne	wly found plant only)					
I acknowledge the duty to disclose information which became availated continuation-in-part.	mation which is material to pable between the filing date of	patentability as defined in 37 CFR of the prior application and the Na	t 1.56, including for o ational or PCT Intern	continuation-in-part applications, lational filing date of the			
I hereby claim foreign priority benefits un PCT international application which design checking the box, any foreign application application on which priority is claimed.	gnated at least one country of	other than the United States of A	merica, listed below	and have also identified below, by			
Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached? YES NO			
Additional foreign application num	bers are listed on a supplem	Lental priority data sheet PTO/SB	/028 attached hereto	<u> </u>			

[Page 1 of 2]

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PTO/SB/03 (03-01)

Appr

U.S. Patent and Trade

U.S. Patent and Trad **DECLARATION – Plant Patent Application** 

Direct all correspondence to: Customer Num or Bar Code La		OR X	correspondence address below		
Name Wanda Heuser Gale					
Address International Plant Management, Inc. 55826 60th Avenue					
Chy Lawrence		State MI	zip 49064		
Country USA	Telephone 800	-424-2765	Fax 616-674-3758		
I hereby declare that all statements made herein of are believed to be true; and further that these state made are punishable by fine or imprisonment, or bo validity of the application or any patent issued there	ements were made worth, under 18 U.S.C.	ith the knowledge that wi	Illful false statements and the like so		
NAME OF SOLE OR FIRST INVENTOR:		A petition has been	n filed for this unsigned inventor		
Given Family Name Way or Surname					
Inventor's Roge D. Way Date 6/21/01					
Residence: City STANLEY	Residence: City STANLEY State NY Country ONT AR 10 Citizenship US				
Mailing Address 2195 Mo77	ROAD				
Mailing Address NYSAES, Department	of Horticul	ture, Cornell U	Jniversity		
City Geneva	State NY	14456 <b>Zip</b>	Country		
NAME OF SECOND INVENTOR:		A petition has bee	en filed for this unsigned inventor		
Given Name Robert		Family Name or Surname Ande	erson		
Inventor's Signature			Date		
Residence: City	State	Country	Citizenship		
Mailing Address					
Mailing Address NYSAES, Departmen	t of Horticu	lture, Cornell	University		
City Geneva	State NY	<b>Zip</b> 14456	Country USA PTO/SB/02A attached hereto.		

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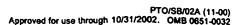
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### **DECLARATION - Plant Patent Application**

Direct all correspondence to: Customer Numb or Bar Code Lab		OR X Con	respondence address below
			·
Name Wanda Heuser Gale			
Address International Plant	Managemen	t, Inc.	
Address 55826 60th Avenue			
Chy Lawrence	*	State MI	ZIP 49064
Country USA	Telephone 800	-424-2765	Fax 616-674-3758
I hereby declare that all statements made herein of are believed to be true; and further that these state made are punishable by fine or imprisonment, or bo validity of the application or any patent issued thereo	my own knowledge a ments were made with, under 18 U.S.C.	are true and that all stateme	nts made on information and belief ul false statements and the like so
NAME OF SOLE OR FIRST INVENTOR:		A petition has been t	filed for this unsigned inventor
Given Name Roger D.		Family Name Way	
Inventor's Signature		<b>*</b>	Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address NYSAES, Department	of Horticul	ture, Cornell U	niversity
City Geneva	State NY	14456 Zip	Country
NAME OF SECOND INVENTOR:		<u> </u>	filed for this unsigned inventor
Given Name Robert		Family Name or Surname Ande	rsgn GK/01
Inventor's Signature	dero		Date 6/10
Residence: City H2 White AM	State NY	Country Octassi	O Citizenship USA
Mailing Address 1/2 White S	prings	Lone	
Mailing Address NYSAES, Departmen	t of Horticu	llture, Cornell	University
City Geneva	State NY	<b>Zip</b> 14456	Country USA
Additional inventors are being named on the	_supplemental Addit	ional Inventor(s) sheet(s) P	TO/SB/02A attached hereto.

[Page 2 of 2]

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#### **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet
Page \_ 1 of \_ 1

Name of Additional Joint Inventor, if any:  A petition has been filed for this unsigned inventor						
Given Name (first and middle [if any])			Family Name or Surname			
Susan K.			Brow	· · · · · · · · · · · · · · · · · · ·		······································
Inventor's Sucan X. Brown						Date 6/19/01
Residence: City Gana	State () Y	, ,	Country	USA		Citizenship U.S
Mailing Address 65 Snell Road			Geneva NY 14456			
Mailing Address Department of Hor	ticulture	, NY	SAES,	Cornell	Uni	versity
<b>City</b> Geneva	State NY		<b>ZIP</b> 144	456 <b>c</b>	ountr	y USA
Name of Additional Joint Inventor, if ar	ıy:	A petition has been filed for this unsigned inventor				
Given Name (first and middle [if any	)	Family Name or Sumame			umame	
Inventor's Signature Date					Date	
Residence: City State Country						Citizenship
Mailing Address						
Mailing Address						
City	State		ZIP		Cou	ntry
Name of Additional Joint Inventor, if a	ny:		A petition I	nas been filed fo		unsigned inventor
Given Name (first and middle [if any]	)	Family Name or Surname				
Inventor's Signature			D			Date
Residence: City State		Country			Citizenship	
Mailing Address						
Mailing Address						
City			ZIP Co		untry	

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	PLANT PATENT APPLICATION (35 U.S.C. 161)		First Named Inventor	Way			
١	DECLARAT	COMPLETE IF KNOWN					
	(37 CFR 1.	63)	Application Number	1			
	1 7 1	Declaration Submitted after Initial	Filing Date				
	with Initial OR	Filing (surcharge (37 CFR 1.16 (e))	Group Art Unit				
•	<u> </u>	required)	Examiner Name	<u> </u>			
	As a below named inventor, I hereby d	leclare that:		· • • ·			
I	My residence, mailing address, and citize	enship are as stated below n	ext to my name.				
	I believe I am the original, first and sole in new and distinct variety of:	nventor (if only one name is I	isted below) or an original, firs	it and joint inventor (if pl	ural names are listed below) of the		
	Sweet Cherry Tree						
	plant named: Ridgewood	Cherry					
	which is claimed and for which a plant pa	atent is sought, the specifical	tion of which				
	X is attached hereto OR	was filed on (	(MM/DD/YYYY)		as United States		
	Application Number	and was ame	ended on (MM/DD/YYYY)		(if applicable).		
4	I hereby state that I have reviewed and tamendment specifically referred to above I have asexually reproduced the plant to	€.		n, including the claim, a	s amended by any		
	Said plant was found in a cultivate	d area (check this box for ne	wly found plant only)				
	I acknowledge the duty to disclose info material information which became avail continuation-in-part.						
li a e e	I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.						
	Prior Foreign Application Number(s)	Country	Foreign Filling Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached? YES NO		

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Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

Type a plus sign (+) inside this bo	$\xrightarrow{x} \rightarrow \bigcirc$	Approve Tiruse throu	PTO/SB/03 (03-0 gh 10/31/2002, QMB 0651-003
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# **DECLARATION – Plant Patent Application**

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	A petition has been fi	iled for this unsigned inventor			
Given Family Name or Surname Way					
Vay		Date 6/21/01			
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ROAD					
of Horticul	ture, Cornell Ur	niversity			
State NY	14456 <b>Zip</b>	USA Country			
	A petition has been	filed for this unsigned inventor			
	Family Name or Surname Ander	cson			
		Date			
State	Country	Citizenship			
of Horticu	lture, Cornell (	Jniversity			
State NY	<b>Zip</b> 14456	Country USA			
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## DEC RATION - Plant Patent Application

Direct all correspondence to: Customer Numb or Bar Code Lab		OR <b>▼</b> ○	rrespondence address below
Name Wanda Heuser Gale			
Address International Plant	Management	t, Inc.	· · · · · · · · · · · · · · · · · · ·
Address 55826 60th Avenue		1	
Chy Lawrence		State MI	ZIP 49064
Country USA	Telephone 800	-424-2765	Fax 616-674-3758
I hereby declare that all statements made herein of are believed to be true; and further that these state made are punishable by fine or imprisonment, or bo validity of the application or any patent issued thereo	ments were made with, under 18 U.S.C. 1	ith the knowledge that will	ful false statements and the like so
NAME OF SOLE OR FIRST INVENTOR:		A petition has been	filed for this unsigned inventor
Given Name Roger D.		Family Name or Surname Way	
Inventor's Signature			Date
Residence: City	State	Country	Citizenship
Mailing Address			
Mailing Address NYSAES, Department	of Horticul	ture, Cornell U	niversity
City Geneva	State NY	14456 <b>Z</b> ip	Country
NAME OF SECOND INVENTOR:		· · · · · · · · · · · · · · · · · · ·	n filed for this unsigned inventor
Given Robert		Family Name or Surname Ande	rsgn Giklei
Inventor's Signature	Ders-	<del>-</del>	Dates 6/11/
Geneva H2 White MA	State NY	Country October	Citizenship USA
Mailing Address 1/2 White 5	prings	Lone	
Mailing Address NYSAES, Departmen	t of Horticu	lture, Cornell	University
Cky Geneva	State NY	Zip 14456	Country USA
Additional inventors are being named on the	supplemental Additi	ional Inventor(s) sheet(s) F	TO/S8/02A attached hereto.

[Page 2 of 2]

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#### **DECLARATION**

**ADDITIONAL INVENTOR(S)** Supplemental Sheet Page \_\_\_\_ of \_\_\_\_

Name of Additional Joint Inventor, if a		A petition has been filed for this unsigned inventor					
Given Name (first and middle [if any])			Family Name or Sumame				
Susan K.		Brown					
Inventor's Susan X. Brown				Date 6/19/01			
Residence: City General	State () Y	<u>,                                    </u>	Country (	15A	c	Citizenship U.S	
Mailing Address 65 Snell Road Geneva NY 14456						14456	
Mailing Address Department of Hor	ticulture	, NY	SAES, C	Cornell U	Jniv	versity	
City Geneva	State NY		ZIP 1445	56 Co	untry	USA	
Name of Additional Joint Inventor, if a	ny:		A petition h	as been filed fo	or this	unsigned inventor	
Given Name (first and middle [if any	/])			Family Name	or Su	ımame	
Inventor's Signature Date							
Residence: City State Country Citizenship					Citizenship		
Mailing Address							
Mailing Address							
City	State		ZIP		Coun	alm.	
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Given Name (first and middle [if any		<u> </u>	A peution na			unsigned inventor	
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Inventor's Signature					-	Date	
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